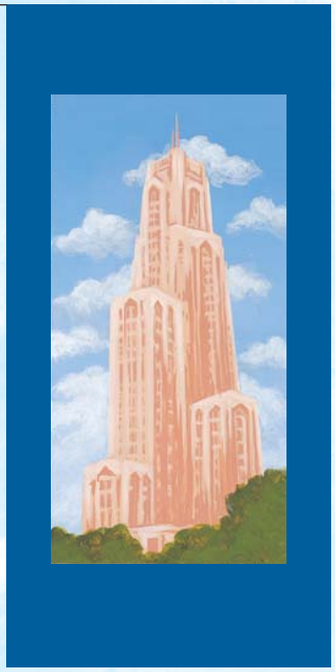


CLASS NOTES

'60s

Barry Brenner (MD '62) has spent a long and successful career characterizing kidney disease and developing ways to combat it. (The eighth edition of his tome *The Kidney* was published in 2007.) Lately, he has turned to epidemiology, identifying risk factors that he hopes will lead to ways to prevent kidney disease. Brenner argues that the reason many newborns weighing less than 4 pounds develop kidney disease as adults is that they are born with half the number of filtering units that a typical-weight baby has. They may have normal kidney function for decades, but they are at risk for high blood pressure and kidney disease later in life. Brenner is the Samuel A. Levine Professor of Medicine at Harvard University and director emeritus of the renal division at Brigham and Women's Hospital. He was named a University of Pittsburgh Legacy Laureate in 2008.

'70s

By the time they reach age 40, one out of every 100 women suffers from premature menopause or what is now more properly referred to as primary ovarian insufficiency (POI). **Lawrence Nelson** (MD '73), who heads the Unit on Integrative Reproductive Medicine at the National Institute of Child Health and Human Development, has seen teenagers with this diagnosis. Although 90 percent of women with POI are never given a definitive cause for the disease, Nelson's research has proven that autoimmunity is at least one cause. Nelson has received a number of awards for his research, including the U.S. Public Health Service Meritorious Service Medal and the Hagerman Award of the National Fragile X Foundation. Nelson was recently awarded patents for his discovery of MATER, a human gene critical for female fertility.

Before medical school, **William Sonis** (MD '74) studied theater arts at Pitt. He says his office is his theater now: "What else do you do with kids but play?" Sonis is director of the residency program in child and adolescent psychiatry at Drexel University and was recently awarded the Parker J. Palmer Courage to Teach Award by the Accreditation Council for Graduate Medical Education (ACGME). "I don't teach; I facilitate learning," he says. "Teaching is passive. I set up the structures and provide the courses, but it's the resident's job to learn. Learning is active."

In his 20s, **Stephen Dummer** (MD '77, Infectious Diseases Fellow '84) worked as a reporter for *Newsweek* and befriended a number of physicians. This reawakened his interest in science, and at the age of 30, he began medical school at Pitt. After a surgical residency at Stanford University, he pursued a Pitt fellowship, where Monto Ho, then chief of infectious diseases, encouraged him to specialize in treating infectious disease in transplant patients. Dummer is now the director of the transplant infectious disease program and a professor of medicine at Vanderbilt University.

'80s

According to the National Psoriasis Foundation, more than half of the patients living with psoriasis report that the disease plays a debilitating role in their daily lives. Psoriasis is a chronic autoimmune disorder most often characterized by lesions on the skin. It's associated with other serious health conditions, such as diabetes, heart disease, psoriatic arthritis, and depression. **Cynthia Guzzo** (MD '82) ran the psoriasis center and dermatology clinical studies unit at the University of Pennsylvania for 10 years before transitioning to work in the pharmaceutical industry. Now, in her role as vice president of Centocor, a subsidiary of Johnson & Johnson, she leads teams of clinical study investigators at sites around the world. One of the studies she led resulted in the development of Remicade, a drug that has been approved to treat six diseases, including psoriasis, and has been used by more than a million patients worldwide.

Guzzo's teams run clinical studies worldwide.

CLARION CALLS

THIS SURGEON WANTS TO CHANGE A FEW THINGS

Timothy Eberlein (MD '77) has some concrete ideas about what surgeons can change about their work that would make a world of difference for cancer patients.

In speeches and papers, Eberlein has issued some clarion calls to his fellow oncological surgeons. The 2003 Hench Awardee is member of the Institute of Medicine, director of the Siteman Cancer Center at Washington University in St. Louis and Barnes-Jewish Hospital, Bixby Professor of Surgery, and chair of the Department of Surgery.

For one thing, he says surgeons should design more clinical trials for cancer. Otherwise, they are leaving a hole in cancer care, he believes.

"Traditionally, in most cancer centers, surgeons aren't very active in clinical trials as the principal investigator. In most institutions, it's probably the medical oncologist," he says.

Yet surgeons see things that other doctors may not, Eberlein explains. Imagine a surgeon in the middle of what was originally thought of as a routine procedure to relieve gastric reflux who then begins to suspect a cancer of the gastroesophageal junction. "A medical oncologist may have never seen that patient if there wasn't [an initial] diagnosis of cancer," Eberlein points out.

FRANK HARRIS

'90s

While watching a scene in the film *My Tale of Two Cities* alongside 1,200 others at Pittsburgh's ornate Byham Theater, **Doug Kress** (Dermatology Resident '93, Pediatric Dermatology Fellow '95) leaned over to his wife and whispered, "Honey, I filmed that." Years earlier, Carl Kurlander—a friend, Visiting Distinguished Senior Lecturer in Pitt's film studies program, and Hollywood producer and screenwriter—described his vision of a film about Pittsburgh. "Make it," Kress responded. "I'll get you started." Kress was the first backer for Kurlander's project, which evolved into an independent, feature-length documentary that premiered at California's Sonoma Valley Film Festival in 2008.

Kress is chief of the pediatric dermatology division for Children's Hospital of Pittsburgh of UPMC and a Pitt clinical associate professor of dermatology. Through his private practice, he and his partner are developing a teledermatology project with Children's that will allow them to consult on cases remotely.

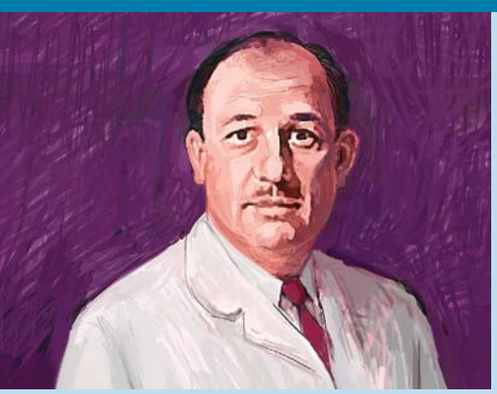
Kress at a screening of *My Tale*.

Ed Kassis (MD '99) completed a general surgery residency at Johns Hopkins University and a surgical oncology fellowship at the National Cancer Institute. He is now one of two thoracic surgery fellows at M.D. Anderson Cancer Center in Houston. "Patients come to us with difficult problems that have no easy solution. There are a lot of nuances to the field, but the majority of the time we are able to help them through a very difficult time in their lives." Kassis will be an attending physician upon completion of his program in June 2009. He'll also continue research in molecular oncology.

Injury is the number one cause of death in American children. In fact, an injury is more likely to kill a child than all diseases combined. As an assistant professor of pediatrics in Baylor College of Medicine participating in its Educational Scholars Fellowship Program, **Karyn Kassis** (MD '99) is developing a pediatric trauma curriculum. "Trauma is generally considered more of a surgical subspecialty, but the pediatricians are the ones working in the ER and often the first to see the trauma patients," she says. After completing her pediatrics residency eight months pregnant, she decided that moonlighting in the ER was the best way to complement the demanding schedule of her husband, Ed Kassis.

How rare is the premature-aging syndrome known as Hutchinson-Gilford progeria? A study published in *The New England Journal of Medicine* last year, with **Sarah Clauss** (Pediatrics Resident '99) as a coauthor, enrolled 15 children, describing them as "nearly half of the world's known patients." Clauss, a pediatric cardiologist at Children's National Medical Center in Washington, D.C., worked with some scientific superstars on the study, including Francis Collins, then head of the National Human Genome Research Institute, who discovered the gene at the heart of this disease. Clauss contributed her clinical expertise in lipids, atherosclerosis, and echocardiography to present the most thorough characterization to date of this disease, which usually leads to death at around 13 years of age. Clauss says that she examined one patient on a weekend and brought her 5-year-old daughter along. "I had explained to her beforehand that the child was going to look different. ... They look kind of wizened." After a couple of hours during which the children played together, Clauss' daughter said, "Mom, I don't know what you're talking about. He was perfectly normal."

—Missy Raterman and Chuck Staresinic



Eberlein speaks up about how surgeons can improve care for cancer patients.

Eberlein would also like to see more cold, hard data collected about whose patients are faring better than others. And he wants to see such data applied to practices. (He notes the American Board of Surgery already requires some outcomes-based criteria for recertification.)

So once you have this data, how do you approach individual surgeons about how they measure up statistically—without ego and pride getting in the way?

"It's most important not to be punitive," Eberlein says. "There are ways you can sit down with knowledgeable people. You can say, 'Here's the way I do liver resections. I tend to lose less blood.'" That's the kind of information surgeons are interested in, he says.

Has this approach worked for him?

"Surgeons are competitive," Eberlein says. "If I find out that your [patients'] length of stay is shorter than mine, I want to know, 'Why is that?' It doesn't take very long for me to replicate that so my patients get out of the hospital sooner." *—Erica Lloyd*

THE WAY WE ARE
CLASS OF '79

The fabled Nephron Art Contest has been democratized, says Pitt professor of medicine **Jamie Johnston** (MD '79). One student this year was inspired to build a *papier mâché* dragon in the shape of the basic kidney unit, but the number of entries has dropped through the years. So Johnston now provides each student with a fill-in-the-blanks nephron. And he went retro: Drawing on the chalkboard, he talked kidney physiology. Then, he worked through scenarios such as dehydration, high salt, and low salt—"running the nephron," as he calls it.

Johnston is a past winner of a National Golden Apple. High attendance and enthusiasm seem to be the norm among his students. Despite the old-fashioned chalk talk, he's been an early adopter of new technologies in the

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classroom. He notes that all of Pitt's first- and second-year lectures are available as online videos and podcasts. In 2008, Johnston was elected the director of Pitt's new Academy of Master Educators—a collective that he describes as "very solid evidence on the part of the administration that they support the development of medical educators."

"I'd be surprised if there are five or six medical schools in the country that have anything like this," he adds.

Johnston

Rubash

South-Paul

For a guy who says he doesn't get back to Pittsburgh much, **Harry Rubash** (MD '79, Res '84) sure has a lot of nice things to say about the place. (He'll be here for the 30-year reunion of his class in May, by the way.) Rubash, an expert in reconstructing failed hip and knee replacements, is chief of orthopaedic surgery at Massachusetts General Hospital and professor of orthopaedic surgery in Harvard Medical School. He looks back on his years of training here and says, "To this day, I regard the physicians and the teachers [at Pitt] as the best in their field, because they instilled in us an incredible love of the profession and a dedication to our patients."

Shortly after leaving Pittsburgh for Boston, Rubash created a full medical scholarship at Pitt in his late father's name.

After two decades at Johns Hopkins University, where she was most recently director of prevention programs at the Sidney Kimmel Comprehensive Cancer Center, **Kathy Helzlsouer** (MD '79) is now director of the cancer prevention center at Mercy Medical Center in Baltimore. She remains a Hopkins professor of epidemiology. In 2007, Helzlsouer received a National Cancer Institute award for outstanding service and scientific leadership. She is now leading an effort at NCI to study ways that vitamin D can reduce the risk and recurrence of certain rare cancers.

At Mercy Medical Center, she studies cancer survivorship. "We are doing well with treatment of many cancers," she says, "but now we're finding problems that are contributed to by the treatment. Since people are surviving, we need to know more about what happens next to help patients have the maximum quality of life as they survive their cancer."

Jeanette South-Paul (MD '79) spent several years serving at the Uniformed Services University of the Health Sciences before becoming the Andrew W. Mathieson Professor and chair of the Department of Family Medicine at Pitt. She's won a number of awards for community service, research excellence, teaching, and mentoring, including the prestigious Joy McCann Foundation Mentoring Award.

Her focus, she says, has been community work that eliminates health disparities.

She recently completed a four-year study revealing that women in minority populations suffer from dramatically higher incidences of depression, high blood pressure, and other risk factors for heart diseases. Data gained during this project led South-Paul, who established the first ambulatory center in the UPMC network to provide care to uninsured patients, to organize an effort in which behavioral health services and primary health services are delivered in one location. "For me, research is of no value if it doesn't create change in the community where people sit," she says.

Jeffrey Milsom (MD '79), section chief and Jerome J. Decosse Professor of Colon & Rectal Surgery at Weill Medical College of Cornell University, has received international acclaim for improving laparoscopic techniques in colon surgery. Under his leadership, his section now performs 90 percent of surgeries using such minimally invasive techniques. He is now exploring a new approach for endoscopic surgical procedures. "We are redesigning how endoscopes are used to make procedures much more therapeutic than diagnostic." Milsom is also partnering with bioengineers and neurosurgeons to advance the development of surgical devices and rethink operating room design to accommodate new technologies.

—MR & CS

MITCHELL B. MAX

JULY 10, 1949–OCT. 22, 2008

Max

While on a sabbatical in Israel in the late 1990s, pain researcher Mitchell Max worked with scientists who inspired him to delve into genetics, thinking that might lead to new strategies and new drugs for pain relief. Years later, he was key to the discovery of genetic variations that help to explain why people have different pain sensitivities.

Max, a professor of anesthesiology at the University of Pittsburgh and senior investigator in the Center for Pain Research, died in October at age 59.

A neurologist, Max was a graduate of Harvard Medical School. He conducted research for more than 20 years at the National Institute of Dental and Craniofacial Research and was chief of its clinical pain research section and medical director of its Pain Research Clinic. He also served as a captain in the U.S. Public Health Service. Publishing in journals such as *Nature Medicine, Pain*, and *Nature Reviews Drug Discovery*, he was an authority in the field. In recent years, by identifying the genes and proteins involved in pain, Max and others were opening the door to understanding the molecular events that lead to the sensation of pain. Shortly after his death, *The Journal of Pain* published his editorial, "Addressing the Decline in NIH Pain Research Funding."

—CS

IN MEMORIAM

'30s

RUTH S. MASTERS
MD '35
DEC. 9, 2008

'40s

CHARLES MATTHEWS SWINDLER
MD '40
OCT. 18, 2008

JAMES STANTON TIPPING
MD '41
NOV. 22, 2008

EARL KEENEY WALLACE
MD '47
NOV. 14, 2008

'50s

NICHOLAS CARROLL CHUBB
MD '51
OCT. 20, 2008

CHARLES M. REEL
MD '51
OCT. 23, 2008

CHARLES ROBERT SLOAN
MD '55
AUG. 2, 2008

DENNIS HOEFFLER
MD '57
SEPT. 2, 2008

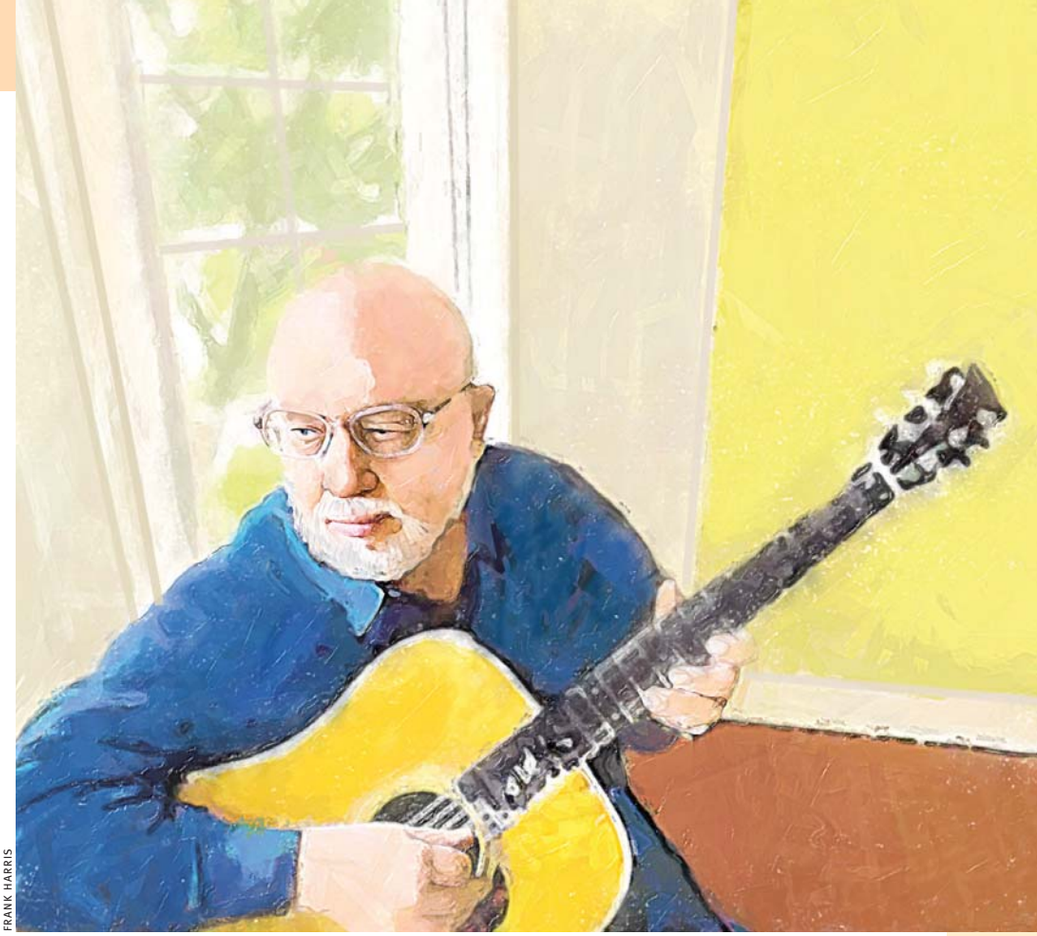
JOSEPH FRANCIS MCKERNAN
MD '57
JULY 24, 2008

'80s

C. STEPHEN JEFFRIES
MD '83
OCT. 16, 2008

RICHARD BERGMAN
A MIND OF HIS OWN

BY SHARON TREGASKIS



FRANK HARRIS

In Pittsburgh, Bergman played blues gigs at Shadyside's Loaves and Fishes. He often carries his guitar to conferences to jam with other scientists.

Richard Bergman's beard very nearly cost him his PhD.

Pittsburgh in 1965 was on the cusp of a cultural revolution. Reproductive endocrinologist Ernst Knobil, then professor and chair of Pitt's physiology department, hewed to the European model of academia—strictly hierarchical and exceedingly formal.

"Well, Bergman," said one professor offended by the 20-year-old grad student's new look, "if you can't be an intellectual, you should at least look like one."

John Urquhart, professor of physiology and Bergman's adviser, stepped in.

"John had to intervene [with the faculty] and tell them I could do whatever I wanted," says Bergman, who still sports some whiskers. "They finally capitulated."

But Urquhart didn't really mean his protégé could do anything. Soon after, Bergman bought a motorcycle, and Urquhart offered him a choice: the bike or the PhD.

"I don't want to train someone only to have his brains splattered over a curb in Pittsburgh," Bergman recalls being told.

"So I had to sell the thing."

Now the chair of physiology and biophysics at the University of Southern California's Keck School of Medicine, Bergman (PhD '71) serves as editor-in-chief for the journal *Obesity* and has more than 300 scholarly articles to his credit. A 2006 recipient of the American Diabetes Association's Banting Medal for Scientific Achievement, the 64-year-old scientist is perhaps best known for the eponymous model that predicts which patients are likely to develop type 2 diabetes. Bergman's minimal model was dubbed "the gold standard" by then-ADA president Robert Rizza when announcing the Banting award. To build the model at the University of Southern California in the '70s, Bergman deployed his undergraduate engineering training, marrying quantitative and qualitative analyses of glucose metabolism.

"He's got a very broad-based approach to interesting scientific questions," says University of California, San Diego Professor of Medicine Daniel Porte, who collaborated with Bergman throughout the '70s and '80s.

"It was his mathematics and model and our physiology and data, but fundamentally, it was a lot of fun. We could look at the same data, argue about it pretty vigorously, and then go out for a drink."

It took more than five years for Bergman's model to catch on with other scientists, and Bergman credits Porte's collaboration for bringing the systems approach to the mainstream.

He's doubtful that young scientists would take such a route today.

"When I came up, people realized you had to develop something, and it might take some time," says Bergman. "Now everyone's looking for something to be in *The New York Times*, which means it has to be in *Science*, *Nature*, or *The New England Journal of Medicine*. Taking the risky approach I took—doing something arcane and not understood by a large fraction of the community—is probably suicide for a young scientist."

An adviser to more than 30 graduate students and nearly two dozen postdoctoral fellows throughout the course of his career, Bergman credits Western Psychiatric Institute and Clinic Research Director Arthur Mirsky, a psychotherapist and physiologist, with cultivating his interest in diabetes and Urquhart for honing his capacity for independent research. "Science is one of the few institutions left where you still train people on a one-on-one basis," he says. "It's incredibly fulfilling."

Diane Finegood, founding scientific director of the Institute of Nutrition, Metabolism and Diabetes at the Canadian Institutes of Health Research, earned her PhD in Bergman's labs at Northwestern and USC.

"Dr. Bergman was critical in cementing for me the importance of thinking of the mentee as a total person," she says. He also taught her the value of "giving people you train a lot of rope," she adds. "Some students get tangled up in the rope, but with smart ones, it's a lot better than telling them what to do." ■